

**Missouri Department of Health and Senior Services**

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Richard W. Moore
Acting Director



Michael L. Parson
Governor

February 3, 2022

Standing Order to Administer ACON Flowflex COVID-19 Antigen Home Test in State-owned Congregate Care Facilities

Purpose

As the vaccine for SARS-CoV-2 becomes widely available within state-owned, congregate care facilities and visitation can safely resume, this order is to enable state-owned congregate care facilities (including, but not limited to, those operated by the Missouri Department of Corrections, Department of Mental Health, Department of Social Services, and the Missouri Veteran's Commission) the opportunity to test symptomatic or asymptomatic visitors through use of the ACON Flowflex COVID-19 Antigen Home Test.

The ACON Flowflex COVID-19 Antigen Home Test may be used to test symptomatic individuals or asymptomatic individuals considered a close contact of an individual with SARS-CoV-2, and who has remained in quarantine for a minimum of seven full days without symptoms of SARS-CoV-2. Symptoms are a new cough, difficulty breathing, loss of taste or smell, fever ($\geq 100.4^{\circ}\text{F}$), congestion/runny nose, nausea/vomiting/diarrhea, sore throat, headache, and myalgia.

Policy

This standing order authorizes any Registered Professional Nurse or Licensed Practical Nurse who is licensed by the Missouri State Board of Nursing or has a privilege to practice in the State of Missouri from another compact state to test individuals in Missouri with ACON Flowflex COVID-19 Antigen Home Test. After receiving documented training, the designee of any aforementioned RN or LPN may also administer this test.

Procedure

1. Evaluate individuals with the above criteria for symptoms of COVID-19 in the past seven days
2. Calculate the number of days of quarantine to assure that testing on an asymptomatic individual is on or after seven full days of quarantine.
3. Provide Flowflex Fact Sheet For Patients
4. Offer opportunity for questions
5. Ensure permission has been obtained
6. Administer the test pursuant to the Product Insert and Procedure Card
7. Document
 - a. Date, time, location of test
 - b. Name, title, and professional license number of person administering the test
 - c. Name of test and manufacturer lot and number
 - d. Results of the test
 - e. Presenting symptoms
 - f. Verification of signed consent form

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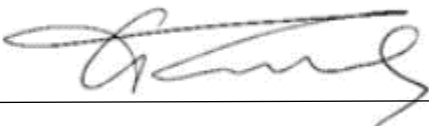
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8. Submit the required data and all test results via secure file transfer protocol in accordance with the procedure specified by the Missouri Department of Health and Senior Services (DHSS) within twenty-four hours of each test's administration.
9. Immediately notify the individual tested of his or her result and implement appropriate control measures accordingly.

This order and procedure shall remain in effect until rescinded or until December 31, 2022.

A handwritten signature in black ink, appearing to read 'George Turabelidze', is written over a horizontal line.

George Turabelidze, MD